

MONTANA BOARD OF PRIVATE SECURITY PATROL OFFICERS AND INVESTIGATORS

301 South Park, Room 430

P. O. Box 200513

Helena, Montana 59620-0513

PHONE: (406) 841-2348 FAX: (406) 841-2309

E-MAIL: dlibsdp@state.mt.us

WEBSITE: discoveringmontana.com/dli/psp

APPLICATION PROCEDURES TO TAKE PROCESS SERVER EXAM

The Board of Private Security Patrol Officers and Investigators does not license process servers. Anyone interested in performing this service needs to request from the Board office a Handbook for Process Servers and an application to take the examination.

Upon completion of the process server examination application and payment of the \$20.00 required fee to take the examination, the Board office will send the examination to the local Montana Job Service Center requested by the applicant, or the applicant may choose to take the examination at the Board office in Helena. A \$20.00 examination fee is also required for any retakes.

Upon successful passage of the examination, the individual will be given/mailed a letter by the Board office certifying the individual passed the examination. It is the exam applicant's responsibility to refer to the Handbook for Process Servers to determine the process they must follow to report to their local district clerk of court office and register accordingly.

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Last First Middle

2. OTHER NAME(S) KNOWN BY _____

3. BUSINESS NAME (if have one): _____

4. BUSINESS ADDRESS _____
Street or PO Box # City and State Zip Country5. HOME ADDRESS _____
Street or PO Box # City and State Zip Country6. TELEPHONE: () () ()
Business Home Fax

7. SOCIAL SECURITY NUMBER _____ FOREIGN ID NUMBER _____

8. DATE OF BIRTH _____ PLACE OF BIRTH _____
City/State ☐ MALE ☐ FEMALE9. ADDRESS OF LOCAL JOB SERVICE TO TAKE EXAM, IF APPLICABLE.

_____10. Have you ever been convicted of a felony? ☐ Yes ☐ No11. Have you been a resident of the State of Montana for one year? ☐ Yes ☐ No**ATTENTION: PLEASE READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS FORM.**

I hereby declare under penalty of perjury the information included in my application to be true and complete to the best of my knowledge. In signing this application, I am aware that a false statement to any question may lead to denial of my application for certification as a registered process server.

Legal Signature of Applicant_____
Dated

Subscribed and sworn to by me this _____ day of _____, _____ at _____.

City/State_____
Notary Public

SEAL

For the State of

My commission expires _____, _____